

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND

1 Date of Request: <u>24 May 2005</u>		2 Serial/Patent # <u>10/518364</u>					
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED				
	Filing		\$ <u>100.00</u>				
	Amendment		\$				
	Extension of Time		\$				
	Notice of Appeal/Appeal		\$				
	Petition		\$				
	Issue		\$				
	Cert of Correction/Terminal Disc.		\$				
	Maintenance		\$				
	Assignment		\$				
	Other		\$				
		7 TOTAL AMOUNT OF REFUND					
		\$ <u>100.00</u>					
10 REASON: <input checked="" type="checkbox"/> Overpayment <input type="checkbox"/> Duplicate Payment <input type="checkbox"/> No Fee Due (Explanation):		8 TO BE REFUNDED BY:					
		Treasury Check					
		Credit Deposit A/C #:					
		9 <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px; text-align: center;">--</td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table>				--	
		--					
11 REFUND REQUESTED BY:							
TYPED/PRINTED NAME: <u>Francine Young</u>		TITLE: <u>Paralegal</u>					
SIGNATURE: _____		PHONE: _____					
OFFICE: _____							
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****							
APPROVED: _____		DATE: _____					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to: